FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instructions)		Offi	ce use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Gillibrand for (	Congress		11111	
ADDRESS (number and s	P.O. Box 15734			
(Check if addre	ss Washington		DC L	20003
	ADDDEGG	CITY▲	STATE	ZIP CODE 📥
Ross@kirstenc			11111	
COMMITTEE'S WEB PAGE ADDRESS (URL)				
http://www.kir	stengillibrand.com 			
COMMITTEE'S FAX N 5187512555  2. DATE  M M 0 9	UMBER			
3. FEC IDENTIFICATION NUMBER C C00413914				
4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete				
Type or Print Name of Treasurer Karen Feldman				
Signature of Treasurer Electronically Filed by Karen Feldman Date Date Date Date				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS				
Office Use Only FE3AN042.PDF		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 12/2007)